TRAJAN PAUL GREEN FULL NAME

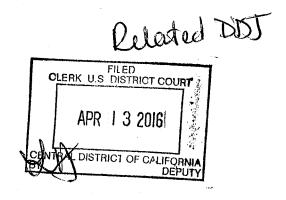
COMMITTED NAME(if different)

CALIFORNIA MEN'S COLONY
FULL ADDRESS INCLUDING NAME OF INSTITUTION

P.O.Box 8103-San Luis Obispo, CA 93409

AT-6602

PRISON NUMBER(if applicable)



UNITED STATES DISTRICT COURT CENTRAL DISTRICT OF CALIFORNIA

TRAJAN PAUL GREEN

PLAINTIFF,

v.

MOULTRIE, Deputy Sheriff, San Bernardino County, SAN BERNARDINO COUNTY SHERIFF'S DEPARTMENT, RON BALDWIN, Food Service Supervisor, San Bernardino County Sheriff's Department, PAYNE, Deputy Sheriff, San Bernardino County, KULOWSKI, Deputy Sheriff, San Bernardino County, DIEZ, Deputy Sheriff, San Bernardino County, CALDERON, Lead Nurse, San Bernardino County Sheriff's Department Correctional Health Services, WARREN, Deputy Sheriff, San Bernardino County, MACIAS, Deputy Sheriff, San Bernardino County, WILLIAMS, Deputy Sheriff, San Bernardino County, A. HIST, Sheriff's Sergeant, San Bernardino County, NAKASIO, Nurse, San Bernardino County Sheriff's Department Correctional Health Services, FOXWELL, Deputy Sheriff, San Bernardino County, CURTIS, Deputy Sheriff, San Bernardino County DEFENDANT(S).

CASE NUMBER

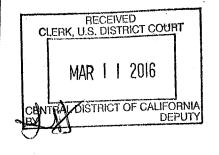
CV 16 - 00698 JGB (KES)

To be supplied by the Clerk

CIVIL RIGHTS COMPLAINT PURSUANT TO (Check one)

[X] 42 U.S.C. §1983

[] Bivens v. Six Unknown Agents 403 U.S. 388 (1971)



A. PREVIOUS LAWSUITS

- Have you brought any other lawsuits in a federal court while a prisoner: [X]Yes []No
- 2. If your answer to "1." is yes, how many? 1

Describe the lawsuit in the space below. (If there is more than one lawsuit, describe the additional lawsuits on an attached piece of paper susing the same outline.)

Eighth Amendment violation, which forbids "cruel and unusual punishments"/ Excessive use of force.

| ., | : | a. | Parties to this previous lawsuit: Plaintiff TRAJAN PAUL GREEN |
|-----|-------|-------|---|
| | | | Defendants R. BOGGUST, et al. |
| | | • | |
| | | b. | Court Southern Division - 411 West Fourth Street, Ste.# 1053 |
| • | | | Santa Ana, CA 92701 |
| | | с. | Docket or case number _5:15-cv-02578-JGB-KES |
| | | d. | Name of judge to whom case was assigned Magistrate Judge Karen E. Scott/Judge Bern |
| | | e. | Disposition (For example: Was the case dismissed? If so, what was the basis for dismissal? Was it appealed? Is it still pending?) Pending |
| | | f. | Issues raised: Racial Discrimination, Deliberate Indifference, Eighth Amendment violation, Assault and Battery, Fourteenth Amendment |
| | | | Violation |
| | | g. | Approximate date of filing lawsuit: December 22, 2015 |
| | | h. | Approximate date of disposition |
| | 2. | Hav | e you filed a grievance concerning the facts relating to your current complaint? Yes No No our answer is no, explain why not |
| | 3. | Is th | e grievance procedure completed? 🗵 Yes 🗆 No |
| | | If yo | our answer is no, explain why not |
| | | | |
| | | | se attach copies of papers related to the grievance procedure. (See attached Exhibits A-J) |
| C. | JUI | RISD | ICTION-Plaintiff also invokes the doctrine of supplemental (former "pendent") jurisdiction. |
| | Thi | s con | nplaint alleges that the civil rights of plaintiff <u>TRAJAN PAUL GREEN</u> (print plaintiffs name) |
| | who | pres | rently resides at CMC-West, P.O. Box 8103-San Luis Obispo, CA 93409 (mailing address or place of confinement) |
| | wer | e vio | lated by the actions of the defendant(s) named below, which actions were directed against plaintiff at |
| S | an | Ber | cnardino County Central & West Valley Detention Center Jails (institution/city where violation occurred) |
| | | | CIVIL RIGHTS COMPLAINT |
| 311 | 6/710 | 171 | |

| 0 | (date or dates) January 7, 2014, to March 24, 2014, (Claim I) |
|----|---|
| N | OTE: You need not name more than one defendant or allege more than one claim. If you are naming more that five (5) defendants, make a copy of this page to provide the information for additional defendants. |
| 1. | Defendant Moultrie resides or works at 9500 Etiwanda Ave., Rancho Cucamonga, CA 91739 (full address of first defendant) |
| | San Bernardino County Deputy Sheriff (defendant's position and title, if any) |
| | The defendant is sued in his/her (Check one or both): XI individual \(\time \text{X}\) official capacity. |
| | Explain how this defendant was acting under color of law: Working/carrying out duties as an employee of the San Bernardino |
| | County Sheriff's Dept. |
| 2. | Defendant Ron Baldwin resides or works at 9500 Etiwanda Ave., Rancho Cucamonga, CA 91739 |
| | Food Service Supervisor (defendant's position and title, if any) |
| | The defendant is sued in his/her (Check one or both): XI individual X official capacity. |
| | Explain how this defendant was acting under color of law: Working/carrying out duties as an employee of the San Bernardino |
| | County Sheriff's Dept. |
| 3. | Defendant San Bernardino County Sheriff's Department resides or works at (full name of first defendant) |
| | 655 E. Third Street - San Bernardino, CA 92415 (full address of first defendant) |
| | Administration Office (defendant's position and title, if any) |
| | The defendant is sued in his/her (Check one or both): □ individual ☒ official capacity. |
| | Explain how this defendant was acting under color of law: |
| | Administering the County's Sheriff's Business |
| | |
| | |

| ° or | n (date or da | ates) | (Clair | n I) | , | (Claim II) | | (Clai | m III) | <u>.</u> |
|------|---------------|----------------------|------------------------------|-----------------------------|---------------------------------------|---------------------------------|---------------------------------------|-----------------------------|-----------------------------|-------------------------|
| N | OTE: Y | ou need ive (5) d | l not name r efendants, r | nore than or nake a copy | ne defenda of this pa | nt or allege m ge to provide | ore than one the informati | claim. If yo on for addi | ou are nami tional defer | ng more than idants. |
| 4. | Defendan | t Pay | ne ame of first de | fendant) | | | | · | resides or | works at |
| | | 630 (full ac | E. Ria | alto Ave defendant) | e., Sar | n Bernard | dino, CA | 92415 | - | • |
| | | San (defend | Bernar dant's position | dino Co | ounty I | Deputy Sh | neriff | | • | |
| | The defen | dant is s | sued in his/h | ner (Check o | one or both | n): XX individu | ıal 🛚 offic | ial capacity | ·. | : . |
| | Explain h | ow this | defendant w | as acting un | nder color | of law: | | | | |
| | Workin | ng/ca | rrying | out dut | ies as | an empl | oyee of | the Sa | n Bern | ardino |
| | | | | | | | | | | |
| 5. | Defendant | Kulo (full na | owski me of first defe | endant) | · · · · · · · · · · · · · · · · · · · | | | | resides or | works at |
| | | 655 (full ad | E. Thi | rd Stre efendant) | et - S | an Berna | rdino, (| CA 9241 | 5 · | |
| | | Tran (defend | nsporta ant's position a | tion De | puty S | heriff | · · · · · · · · · · · · · · · · · · · | | | |
| | The defend | dant is s | ued in his/h | er (Check o | ne or both |): XX individu | ál 🛭 offici | ial capacity | | , . |
| | Explain ho | w this c | lefendant w | as acting un | der color | of law: | | | | |
| | Workin | g/car | rying o | out dut | <u>ies as</u> | an empl | oyee of | the Sa | n Berna | ardino |
| | County | Sher | iff's I | Dept. | | | | | | |
| 5. | Defendant | Diez (full nar | ne of first defe | ndant) | · · · · · · · · · · · · · · · · · · · | | | | resides or v | works at |
| | | 9500 (full add | Etiwar Iress of first de | nda Ave. fendant) | ., Ran | cho Cucai | monga, C | CA 9173 | 9 | |
| | | San (defenda | Bernaro ant's position a | dino Cound title, if any) | inty D | eputy She | eriff | | | |
| | The defend | lant is su | ied in his/he | er (Check or | ne or both) |): XX individua | al 🛮 offici | al capacity. | | |
| | Explain ho | w this d | efendant wa | ns acting und | der color c | of law: | | | | |
| | Working | g/car | rying c | ut duti | les as | an emplo | oyee of | the Sar | n Berna | rdino |
| | | | | | | | | | | |
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| | dates) | (Claim I) | (Claim II) | (Claim III) |
|------------|-------------------------|--|---|--|
| NOTE: | You need a five (5) det | not name more than one fendants, make a copy o | e defendant or allege more the of this page to provide the in | nan one claim. If you are naming more than formation for additional defendants. |
| 7. Defenda | ant Calo | leron ne of first defendant) | | resides or works at |
| | 9500 | * | ., Rancho Cucamor | nga, CA 91739 |
| | Lead (defenda | Nurse, Correction and title, if any) | ctional Health Se | ervices |
| The defe | endant is su | ed in his/her (Check or | ne or both): XXindividual | ☑ official capacity. |
| Explain | how this de | efendant was acting und | der color of law: | |
| Worki | lng/car | rying out duti | ies as an employe | e, contractor, agent or |
| | | | rnardino County S | · |
| B. Defenda | nt <u>Warr</u> | en e of first defendant) | | resides or works at |
| | . <u>9500</u> | | ., Rancho Cucamon | ga, CA 91739 |
| | San l (defendar | Bernardino Count's position and title, if any) | unty Deputy Sheri | ff |
| The defe | ndant is sue | ed in his/her (Check on | ne or both): 💯 individual 🔝 | ☑ official capacity. |
| Explain l | now this de | fendant was acting und | ler color of law: | |
| Worki | ng/carr | ying out duti | es as an employe | e of the San Bernardino |
| Count | y Sheri | ff's Dept. | | |
| • Defendar | nt Macia | of first defendant) | | resides or works at |
| | 630 E | C. Rialto Ave. | , San Bernardino | , CA 92415 |
| | San B (defendant | Sernardino Court's position and title, if any) | nty Deputy Sheri | ff |
| The defer | ndant is sue | d in his/her (Check one | e or both): XX individual (| ☑ official capacity. |
| Explain h | ow this def | endant was acting unde | er color of law: | |
| Workir | ng/carr | ying out dutie | es as an employee | e of the San Bernardino |
| | | ff's Dept. | | |

| on (date or o | dates) | (Claim I) | (Claim II) | , | (Claim III) |
|---------------|---------------------|---|--|-----------------|----------------------------|
| NOTE: | You need five (5) d | I not name more than one efendants, make a copy of | defendant or allege more this page to provide the | than one claim. | If you are naming more tha |
| 10.Defenda | nt <u>Wil</u> | liams ame of first defendant) | | | resides or works at |
| | 950 (full ac | O Etiwanda Ave. Idress of first defendant) | , Rancho Cucamo | nga, CA 9 | <u>173</u> 9 |
| | San (defend | Bernardino Cour dant's position and title, if any) | nty Deputy Sher | iff | |
| The defe | endant is s | sued in his/her (Check one | or both):XX individual | 🛭 official cap | pacity. |
| Explain l | how this o | defendant was acting unde | er color of law: | | • |
| <u>Worki</u> | ng/car | rying out dutie | es as an employe | ee of the | San Bernardino |
| | | iff's Dept. | | | |
| | | Hist me of first defendant) | | | |
| | . <u>950</u> | O Etiwanda Ave. dress of first defendant) | , Rancho Cucamo | onga, CA 9 | 91739 |
| | San (defend | Bernardino Cou ant's position and title, if any) | nty Sheriff Ser | geant | |
| The defer | ndant is s | ued in his/her (Check one | or both): 🛭 individual | XXofficial cap | acity. |
| Explain h | ow this d | efendant was acting under | color of law: | | · |
| Workin | g/car | rying out dutie: | s as an employe | e of the | San Bernardino |
| County | Sher | iff's Dept. | · | | |
| 2. Defendan | t Naka | asio ne of first defendant) | | | resides or works at |
| | 9500 (full add | O Etiwanda Ave., ress of first defendant) | , Rancho Cucamo | nga, CA 9 | <u>17</u> 39 |
| | Cori (defenda | rectional Health | n Services Nurs | e. | · |
| The defen | dant is su | ed in his/her (Check one o | or both): 図 individual : | XXofficial capa | acity. |
| Explain ho | ow this de | efendant was acting under | color of law: | | |
| Working | g/carr | ying out duties | as an employee | e, contra | ctor, agent or |
| | | of the San Berna | • | | |
| | | | | | |

| 13. | Defendant | Foxwell (full name of first defendant) | resides or works at |
|-----|--|---|---------------------|
| | | 9500 Etiwanda Ave., Rancho Cucamonga, CA 9173 (full address of first defendant) | 9 |
| | | San Bernardino County Deputy Sheriff (defendant's position and title, if any) | |
| | The defend | ant is sued in his/her (Check one or both): XX individual 区 official capacity | |
| | Explain ho | w this defendant was acting under color of law: | |
| | | g/carrying out duties as an employee of the Sa | n Bernardino |
| | | Sheriff's Dept. | |
| | | | |
| 14. | Defendant | Curtis | resides or works at |
| 14. | Defendant | Curtis (full name of first defendant) | resides or works at |
| 14. | Defendant | | |
| 14. | Defendant | (full name of first defendant) 9500 Etiwanda Ave., Rancho Cucamonga, CA 91739 | |
| 14. | | (full name of first defendant) 9500 Etiwanda Ave., Rancho Cucamonga, CA 91739 (full address of first defendant) | 9 |
| 14. | The defenda | (full name of first defendant) 9500 Etiwanda Ave., Rancho Cucamonga, CA 91739 (full address of first defendant) San Bernardino County Deputy Sheriff (defendant's position and title, if any) | 9 |
| 14. | The defendation to the defendation of the defendati | (full name of first defendant) 9500 Etiwanda Ave., Rancho Cucamonga, CA 91739 (full address of first defendant) San Bernardino County Deputy Sheriff (defendant's position and title, if any) ant is sued in his/her (Check one or both): And individual Confficial capacity. | 9 |

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CLAIM I

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| Eighth Amendme | | | | | | |
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| act with the v | very specific | c intent to | cause h | arm and | depriva | tion. |
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- 1. On January 2, 2014 Plaintiff was seen by San Bernardino County Sheriff's Department Correctional Health Services Dietician Mrs. Coleman for medical/health issues, predominantly that Plaintiff suffers from Gastrointestinal Disorder. Dietician Mrs. Coleman immediately ordered for Plaintiff to begin receiving a "special diet," as well as two (2) supplemental in-between-meal snacks (see INMATE GRIEVANCE INVESTIGATION #1434G01109 dated February 2, 2014, under "FINDINGS," attached hereto as Exhibits "D") for the specific purposes of Plaintiff not being able to consume his daily medications on an empty stomach, as a very direct result of Plaintiff's gastrointestinal disorder.
- 2. On January 7, 2014 Plaintiff "WAS NOT FED LUNCH" (i.e., deliberate indifference of the Plaintiff's need for his medically ordered "special diets" by Defendant's Food Service Supervisor Ron Baldwin, Deputy Payne, Deputy Kulowski, Deputy Diez, Deputy Warren, Deputy Macias, and Correctional Health Services Lead Nurse in Charge, Ms. Calderon) and on January 8, 2014 Plaintiff filed a four (4) page INITIAL INMATE GRIEVANCE regarding the matter (see attached hereto as Exhibit "A"). That grievance was not addressed/responded to.
- 3. On January 8, 2014 Plaintiff filed another INITIAL INMATE GRIEVANCE on a Correctional Health Services Nurse and on a Dr. P. On January 15, 2014 an INMATE GRIEVANCE INVESTIGATION #301401016 was completed (see attached hereto as Exhibit "B").
- 4. On January 19/20, 2014 Plaintiff filed another INITIAL INMATE GRIEVANCE, RE: SPECIAL DIET, NO PM SNACK GIVEN (i.e., deliberate indifference of the Plaintiff's need for his medically ordered "special diets" by Defendant Food Service Supervisor Ron Baldwin) (see attached hereto as Exhibit "C"). On February 1, 2014 an INMATE MEDICAL GRIEVANCE INVESTIGATION was completed, and on February 2, 2014 another INMATE GRIEVANCE INVESTIGATION was also completed, both Grievance's numbered 1434G01109 (see attached hereto as Exhibit's "D").
- 5. On January 26, 2014 Plaintiff filed another INITIAL INMATE GRIEVANCE, RE: DIET, AGAIN DID NOT RECEIVE BREAKFAST (i.e. again, deliberate indifference of the Plaintiff's need for his medically ordered "special diets" by Defendant Food Service Supervisor Ron Baldwin) (see attached hereto as Exhibit "E"). That grievance also was not addressed/responded to.

- 6. On March 9, 2014 Plaintiff filed another INITIAL INMATE GRIEVANCE of an incident of Plaintiff not being fed dinner on March 8, 2014 (i.e. again, deliberate indifference of the Plaintiff's need for his medically ordered "special diets" by Defendant's Deputy Williams, Deputy Moultrie, Sergeant A. Hist, and Correctional Health Services Nurse Nakasio) (see attached hereto as Exhibit "F"). From the time of the incident on March 8, 2014, three (3) Deputy's (i.e., Defendant's Foxwell, Moultrie, and Curtis) in addition to the Staff Sergeant on duty on March 10th, all refused to sign Plaintiff's grievance. After much diligence and perserverance by Plaintiff, the grievance was finally signed by a non-involved Deputy Chau, three (3) days later on March 11th (see again, attached hereto as Exhibit "F").
- 7. On March 10, 2014 Plaintiff again did not receive his AM Meal Snack (i.e. again, deliberate indifference of the Plaintiff's need for his medically ordered "special diets" by Defendant Food Service Supervisor Ron Baldwin). Plaintiff informed again both Defendant's, Deputies Foxwell & Moultrie, which they said they would check-on it. When Plaintiff made inquiry minutes later of Defendant Deputy Foxwell, he ignored Plaintiff. Plaintiff then asked Defendant Deputy Foxwell for a grievance to report the incident, but Defendant Deputy Foxwell told Plaintiff "NO!" (i.e., deliberate indifference of the Plaintiff's need for his medically ordered "special diets" by Defendant's Deputies Foxwell & Moultrie).
- 8. On March 14, 2014 an INMATE GRIEVANCE INVESTIGATION #1434G03071 was completed (see attached hereto as Exhibit "G").
- 9. On March 24, 2014 Plaintiff filed another INITIAL INMATE GRIEVANCE (see attached hereto as Exhibit "H"). Defendant Deputy Moultrie denied Plaintiff and another Muslim inmate the opportunity to obtain their eating utensils to eat their dinner meal with. Defendant Deputy Moultrie instructed Plaintiff to eat his meal with his fingers. Defendant Deputy Moultrie further stated to Plaintiff "that he didn't give-a-fuck if [Plaintiff] was able to eat or not because he was getting off work soon and he was going to eat!" (deliberate indifference of the Plaintiff's need for his medically ordered "special diets," coupled with a malicious and sadistic act with the intent to purposefully cause harm and deprivation by Defendant Deputy Moultrie)
 - 10. Plaintiff tried again very respectfully to explain to Defendant

Deputy Moultrie that Plaintiff has serious health/stomach complications (i.e., Gastrointestinal Disorder) and that Plaintiff must eat/have food on his stomach in order to take/consume Plaintiff's nightly medication, although Defendant Deputy Moultrie still denied Plaintiff (i.e. again, deliberate indifference of the Plaintiff's need for his medically ordered "special diets," coupled with a malicious and sadistic act with the very specific intent to cause harm and deprivation by Defendant Deputy Moultrie).

- 11. As a very direct result, Defendant Deputy Moultrie again caused Plaintiff's stomach severe pain and discomfort, and as another very direct result Plaintiff had to refuse to take his much needed/required nightly medications. Lastly, Defendant Deputy Moultrie also refused to provide Plaintiff with a grievance form to properly report the incident (i.e. again, deliberate indifference of the Plaintiff's need to report a grievance, coupled with a malicious and sadistic act with the very specific intent to cause harm and deprivation by Defendant Deputy Moultrie).
- 12. On March 30, 2014 a "first" INMATE GRIEVANCE INVESTIGATION #1434G0141 was completed (see attached hereto as Exhibit "I").
- 13. At some point after that a Sergeant K. Owens conducted either another, or a further investigation, at which time Sgt. Owens personally informed Plaintiff that Defendant Deputy Moultrie did indeed admit to Plaintiff's allegations, but due to Sheriff Department regulations, Sgt. Owens could not disclose to Plaintiff any disciplinary actions that were to be taken against Defendant Deputy Moultrie (see "second" INMATE GRIEVANCE INVESTIGATION #1434G03141(1) dated May 10, 2014, attached hereto as Exhibit "J").
- 14. The "seriousness" of Plaintiff's gastrointestinal disorder, if not addressed by way of proper diet, significantly affects Plaintiff's daily well-being by severely eliminating his ability to adequately perform his required daily activities. As Plaintiff explained to the San Bernardino County Sheriff's Department Correctional Health Services Staff in August of 2013 and then again to Dietician Mrs. Coleman on January 2, 2014, Plaintiff experiences "SEVERE" stomach cramping and pains upon not consuming a proper diet, and/or by taking medications on an empty stomach.
- 15. The above described symptoms are outwardly visible by Plaintiff as he cannot function normally, forced to lay-down and curl-up in a ball-of-

excruciating pain. In those severe situations Plaintiff will lose complete consciousness from the excruciating pain and pass-out, as happened twice (see again, attached hereto as Exhibit "B" under COMPLAINT). Plaintiff has suffered from gastrointestinal disorder from an early age of 20 years-old, first being diagnosed as lactose intolerant, and later diagnosed with bleeding ulcers.

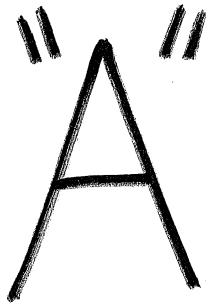
- 16. "To establish an Eighth Amendment violation, a prisoner 'must satisfy both the objective and subjective components of a two-part test."
- 17. The deliberate indifference standard requires a Plaintiff to show that the Defendants had actual knowledge of an objectively cruel condition (in medical cases, a serious medical need; in Plaintiff's case, ordered special medical diets in addition to two (2) supplemental in-between-meal-snacks as a very direct result of Plaintiff's gastrointestinal disorder/in-ability to take medications on an empty stomach) "failure to treat [that] condition could or did result in further significant injury or the unnecessary and wanton infliction of pain."
- 18. However, the subjective component requires a Plaintiff to also allege facts which show that the Defendants had the culpable mental state, which is "'deliberate indifference' to a substantial risk of serious harm." "Deliberate indifference" is evidenced only when "the [Defendants] knows of and disregards an excessive risk to inmate health or safety; the [Defendants] must both be aware of the facts from which the inference could be drawn that a substantial risk of serious harm exists, and [they] must also draw the inference."
- 19. The Eighth Amendment proscribes only "the 'unnecessary and wanton infliction of pain,' including those sanctions that are 'so totally without penological justification that it results in the gratuitous infliction of suffering.'"
- 20. In Eighth Amendment cases "whether a malicious and sadistic act was done purposefully to cause harm," is the primary question. One court has held that "sadistic" means "extreme or excessive cruelty or delighting in cruelty" as opposed to "regular cruelty," and that "'maliciously' and 'sadistically,' have different meanings, and the two together establish a higher level of intent than would either alone." Some courts have said that the pain and suffering directly resulting from the "unnecessary and wanton

infliction of pain" can satisfy the requirement of showing "substantial harm:"

- 21. One court found an Eighth Amendment violation where "the officers acted, if not 'maliciously and sadistically,' with at least a viciousness going beyond 'a good faith effort to maintain or restore discipline.'" In such other Eighth Amendment cases, the courts have held that deliberate indifference may be shown by "a series of incidents closely related in time" or by "systemic deficiencies [that] make suffering inevitable..." Officials must be shown to have known about the resulting risks (which courts and juries can conclude from a showing that the risks were obvious).
- 22. With the above detailed and explained, accompanied by the exhibits, Plaintiff has adequately and properly satisfied his obligation in presenting a prima facie case for redress.

| E. ` | REC | UEST | FOR | REL | JEF |
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| I belie | eve that I am entitled to the following specific relief: |
|---------|--|
| 1. | Issue a declaratory judgment that the Defendants' actions |
| | complained of herein violate Plaintiff's rights under the |
| | U.S. Constitution and as otherwise alleged herein; |
| | |
| 2, | Award Plaintiff monetary damages, compensatory and punitive, in |
| | an amount to be determined by/and at a trial; |
| | |
| 3. | (if it becomes applicable) Award Plaintiff the costs of suit and |
| | reasonable attorney's fees; and |
| | |
| 4. | Grant Plaintiff such other and further relief as the Court deems |
| | just and proper. |
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| M= | arch 7, 2016 |
| 1-10 | (Date) (Signature of Plaintiff) |
| | |



Case 5:16-cv-00698-JGB-KES Document 1 Filed 04/13/16 Page 17 of 43 Page ID #:17



SAN BERNARDINO COUNTY SHERIFF'S DEPARTMENT Detention and Corrections Bureau

| $[\ \ \]$ | ADC |
|------------|-------------|
| | CDC |
| | GHRC |
| | WVDC |
| | Type I Jail |

| INITIA | L INIV | IATE C | RIEVA | NCE |
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| GRIEV | ANCE | APPE | AL | |

| Inmate's Name KAJAN Pau | I GREEN | Boo | iking# 13053 | 01385 |
|--|--|--|--|-----------------|
| Housing LocationTank | | Date of Complaint | January 7 | 2014 |
| Date of Incident 1-7-2014 | Time of Incident $ ot\! \!$ | M-PM Location | on of Incident \angle $\!$ | & West Yalle |
| You have 10 days from the day the ind grievance is used to report a sexual as | sault. | mit your grievance. Y | ou do not have a time | limit if the |
| WAS NOT FED LUNC | IIII AS I VER | ymoch stromly | believe is the sir | luation in my |
| Case (No.: FWV130185a) b | ecause there ha | s not been a full | thorough investi | ocation of mi |
| claims since my arrest on M | ay 30,2013 and | calso since Iu | vent to Trial wi | th my very |
| unprepared Atty. Mr. Gary f | ibland Aug 12- | -15,2013 witho | out knowing all | of the evidence |
| against me live. Der my Police | | | | |
| regardless of all of Majormany | - 1 | | | |
| are the contents of the misce | | | | |
| receipt for a purchase of new | | | | |
| evidence planted). I have t | and the second s | | 3 3 | 4 2 |
| nored! In specific regards-1 | | A. | | |
| Staff that ultimately led or | And the second of the second of | | the contract of the contract o | |
| Bogaust on Dec. 24,2013 (4 | | The second secon | ニー・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・ | |
| orders he gave me to stand- | | | | |
| | The second secon | of 4 ' | | |
| | (ATTACH ADDITIONAL | PAGES IF NEEDED) | | |
| Inmate Signature SEE PAGE | 40+4 | | _ Date | |
| DO NOT You have 10 days from the date indicat | WRITE BELOW THIS ed below to complete | S LINE – STAFF USE the grievance investig | ONLY gation and return it to | the inmate. |
| Received By Employee's Na | me (please print) | Date | Time | |
| Grievance # | Date | Assigned to | | |

Original: Inmate's Booking Jacket

Copy: Inmate

Case 5:16-cv-00698-JGB-KES Document 1 Filed 04/13/16 Page 18 of 43 Page ID #:18



SAN BERNARDINO COUNTY SHERIFF'S DEPARTMENT Detention and Corrections Bureau

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| × 1 | 111111 | | | |
| W | INITENIÄ INI | MATEG | RIEVANCE | |
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| | ADC |
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| `Z. | CDC |
| " " | GHRC |
| | WVDC |
| | Type I Jail |

| Inmate's Name <u>IRA</u> | | GREEN | | Booking # | 13053013 | 85 |
|--|-------------------|---|---------------------------------------|---|--|---------------------------------------|
| Housing Location | Tank | | Date of Co | omplaint Jan | vary 7, 201 | and the second |
| Nuevo Company | | Γime of Incident | AM-PM | Location of Inc | cident OC \$\\\ | 1 Valley |
| EXPLA You have 10 days from to grievance is used to repo | he day the incide | ent occurred to s | dates, times and submit your griev | | | if the |
| Sincerest and hones | | | | · 5 . | 7 | 1 1 1/46/6/ |
| incarcerated, I have | | | | 3. | · · · · · · · · · · · · · · · · · · · | |
| was dropped throw | 1 | 化二氯化二甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基 | ·囊形式 磁压性量性 2015年3月1日 - 1 | | | |
| Coleman on Jan. 6 | | | | | | 1 3 |
| her to see me. Mrs | . Coleman a | loo repeated | ito me jeve | eral times t | that she just | never did |
| see any emails to h | er regardin | me need | ing to be se | en. Inado | Action, Mis. C. | oleman_ |
| also never made as | n mention | 40 me 4n/c | Hhere's a | thoical an | naimele sixil | almorth. |
| waitas itis so indi | 5 | | the company to a contract the first | 11 16 | | |
| On Jan. 7, 2014 I | | | 그는 사람 선생님들이 하는 물리가 없는 네 나갔다. | entropies in the engineering of the estate of the | | |
| After finishing my | Α | - 1 - 1 - 254 - 1 | | | and the same of th | |
| lunch be sent will | | | | | | |
| your lunch at lunch | | 7 1 | | | | |
| year with the | · 11110 1120 | | WEATH III | Tunout | ing CARDONNELL | 30 -971 |
| | | PAGE | A 01 4 | | | |
| | | | NAL PAGES IF NEE | DED) | | |
| Inmate Signature | e page ! | 1014 | | D | ate | |
| You have 10 days from th | | | HIS LINE – STA ete the grievance | | nd return it to the in | mate. |
| Received By | | | Date | | Time | |
| | Employee's Name | (please print) | | | · | |
| Grievance# | Da | nte | Assig | ned to | | · · · · · · · · · · · · · · · · · · · |

Original: Inmate's Booking Jacket

Copy: Inmate

Case 5:16-cv-00698-JGB-KES Document 1 Filed 04/13/16 Page 19 of 43 Page ID #:19



SAN BERNARDINO COUNTY SHERIFF'S DEPARTMENT ADC

Detention and Corrections Bureau

A INITIAL INMATE GRIEVANCE

GRIEVANCE APPEAL

| | GHRC | |
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| $\overline{\Box}$ | Type I Ja | ai |

Z CDC

| Inmate's Name TRAJAN Paul GREEN Booking # 1305301395 |
|--|
| Housing Location F Tank Date of Complaint January 7, 2014 |
| Date of Incident 1-7-2014 Time of Incident AM-PM Location of Incident COO West Valey |
| EXPLAIN YOUR COMPLAINT (include dates, times and names of persons involved) You have 10 days from the day the incident occurred to submit your grievance. You do not have a time limit if the grievance is used to report a sexual assault. |
| lowing orders I did exactly that and immediately exited towards Marshalling. While in Marshalling I then asked Transportation Dep. Kulowski if he knew if my lunch was |
| also being transported and he replied to me "Worry about what you exit for lunch at lunch time |
| at West Valley and then ordered me to get in line to be chained for transportation and as always. I complied! At West Valley now upon being walked down to Medical all the other Ir |
| mates were given their PB=J sandishich lunches. Upon my arrival to Medical I immediately |
| made two (2) requests to Dep. Diezand to the X-ray Tech #1) If possible could I please have a quick word with the Dietician Mis. Coleman and #2) Since it was documented in the |
| compoter (in my Medical Diet File) that I cannot consume placest PB&I sandwhiches could I please be given a meat sandwhich instead and a piece of fresh front as my snack? The X- |
| ray Tech and Dep. Diez both informed me that Mrs. Coleman was off-site but the Head Nos |
| in Charge Ms. Calderon was emailing Mrs. Coleman about my requests and to sit tight for a |
| (ATTACH ADDITIONAL PAGES IF NEEDED) |
| Inmate Signature SEE PAGE 4 of 4 Date |
| DO NOT WRITE BELOW THIS LINE – STAFF USE ONLY You have 10 days from the date indicated below to complete the grievance investigation and return it to the inmate. |
| Received By Date Time |
| Grievance# Date Assigned to |

Original: Inmate's Booking Jacket

Copy: Inmate

Case 5:16-cv-00698-JGB-KES Document 1 Filed 04/13/16 Page 20 of 43 Page ID #:20



SAN BERNARDINO COUNTY SHERIFF'S DEPARTMENT

Detention and Corrections Bureau
CONTO
INITIAL INMATE GRIEVANCE

GRIEVANCE APPEAL

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|---|---------------------|--|--|---------------------------------------|--|-----------------|
| Inmate's Name <u> </u> | MAN Poul (| AKEEN | | Booking # | 1305301385 | |
| Housing Location | F" Tank | | Date of Cor | mplaint <u></u> ப்ப | 10ary 7,2014 | |
| Date of Incident | 7-2014 | Time of Incident | AM-PM | Location of In | cident COC & West V | alby |
| | m the day the incid | | | | sons involved) not have a time limit if the | |
| while and wait for | | | | | | G 25 1 12 12 1 |
| anything I then a | also made in | n lunch/sand | which read | rest to Dec | a Warren as well a | nd he |
| told method he w | | | | | | |
| some more-time h | ad pusced au | ound 10:30A1 | 1 we were | valked bu | sk to the holding cel | laven |
| and I again made | my oka to D | eo Kolowski | and he ign | ored me ar | id give no reply. Af | ler . |
| hours went by Dec | | | | | | |
| also asked him about abiling a meat sandwhich to eat and he replied to me Don't worry | | | | | | |
| about lurch I have | 3 A | | 4 | | | 4 |
| discomfort I then a | | in a sa a sa kabana ka a sa € | | | ·新月 一年 第二日 计通信 化对象 化对象 经营销额的 | |
| tollow "Shot the f | | oran de la companya de la deserva de ∰in | ₹ | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | (1) \$1 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) | 나는 그 선물 모든 보고 [|
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| | | DAGE | 4 1 14 | | | |
| | | (ATTACH ADDITIONA | AL PAGES IF NEED | DED) | | |
| Inmate Signature | 421 | | | | Date <u>Jon 8,201</u> | 4 |
| |) NOT | VRITE BELOW TH | HOLINE OTA | 1747 | | |
| You have 10 days from | | | | | and return it to the inmate | |
| Received By | Employee's Nan | ie (please print) | Date | | Time | |
| Grievance# | | ate | Assigı | ned to | | |

Original: Inmate's Booking Jacket

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SAN BERNARDINO COUNTY SHERIFF'S DEPARTMENT DETENTION AND CORRECTIONS BUREAU

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INMATE GRIEVANCE INVESTIGATION

| | Date January 15, 2014 | Grievance # 301401016 |
|--------------|---|--|
| | Inmate's Name GREEN, TRAJAN | Booking # 1305301385 |
| | Investigation Conducted By M. SWIFT, RN | Employee # |
| ar an annual | SUMMARY OF COMPLAINT | AND FINDINGS |
| | COMPLAINT: Mr. Green stated that he has a gastrointestinal disorder and He was in the medical area on January 8, and the Nurse ga stated that he has passed out twice from not taking food wi to his pills until lunch time and instead the Nurse wanted hi rude and ended the conversation. | ve him high blood pressure medication. He the the medication. He was requesting to hold on |
| | FINDING: Mr. Green is taking medications that are not usually given wand a mid-morning snack and a night time snack were ordenight time. He saw Dr. P for another problem and during the takes his medication. Dr. P told him to save his snack and | red. His morning medication was changed to visit, he stated that he needed food when he |
| | Unit dose medications must be taken in front of the Medical | staff. |
| | ACTION TAK | ■N |
| | None at this time. Mr. Green is getting a mid-morning snack eat his snack when he receives his medication. | and a night-time snack. He should be able to |
| | | |
| | Reviewed By A Duty Lleytenant 1/17/14 | approved By Facility Administrator |
| | Written reply given to inmate on At | By Print Name |
| | This complaint has been discussed with me and I have been adv | vised of the findings. |
| | Inmate Signature | Date |
| and the same | | |

☐ Original: Inmate's Booking Jacket

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ASU#050402 Revised: 06.30.2005

anne a saine an ae alas in al Mallate Fridail Fish Millian Bartin an airth an aine a SAN BERNARDINO COUNTY SHERIFF'S DEPARTMENT ADC **Detention and Corrections Bureau** CDC **GHRC** WVDC TIAL INMATE GRIEVANCE Type I Jail Booking # 1305301385 Inmate's Name Housing Location Date of Complaint Date of Incident Jan 19 Time of Incident Miles EXPLAIN YOUR COMPLAINT (include dates, times and names of persons involved) meals snacks to counteract snacks have been very wrong in content and times. have an open previous Grievance (#3014 estigation and SECOND, on Jan. 12, 2014 per the Medical S UP Heavest to see Dietician Mrs. Coleman to specifical issues (complaints but I've received no response or call PME IN THIS MATTER (ATTACH ADDITIONAL PAGES IF NEEDED) Inmate Signature DO NOT WRITE BELOW THIS LINE - STAFF USE ONLY JONES Received By

Original: Inmate's Booking Jacket

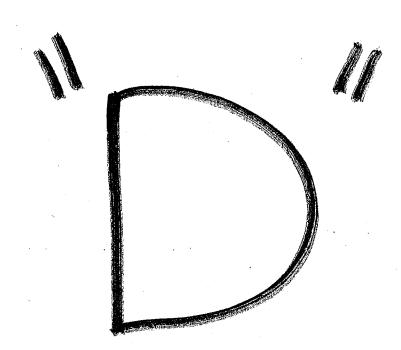
Copy: Inmate

Assigned to

Employee's Name (please print)

Copy: Administration

Grievance#



SAN BERNARDINO COUNTY SHERIFF'S DEPARTMENT DETENTION AND CORRECTIONS BUREAU

| ₩WDC Medical |
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| WVDC Medical |
| CDC Medical |
| ADC Medical |

INMATE MEDICAL GRIEVANCE INVESTIGATION

| Date 02/01/2014 | Grievance # 1434G01109 |
|---|---|
| Inmate's Name Green, Trajan | Booking # 1305301385 |
| Investigation Conducted By | Employee # G2743 |
| SUMMARY OF CO | MPLAINT AND FINDINGS |
| Complaint: You state that you are not receiving your PM and I snack to take with your bedtime meds. ニロソビス | pedtime snack. You state that you are not getting your |
| Findings: | |
| indicate that your concerns have been appropriate | medical record and other documents (as applicable) ely addressed by our medical staff. Your diet has been ff. If you should have any other concerns, please feel that you can be evaluated at nurse sick call. |
| ACT | ION TAKEN |
| No action required | |
| | |
| | |
| Reviewed ByNursing Supervisor II | Approved ByHealth Services Administrator |
| Written reply given to inmate on | At By Time Print Name |
| This complaint has been discussed with me and I have | e been advised of the findings. |
| Inmate Signature | Date |
| | |

☐ Copy: Inmate

☐ Original: Inmate's Medical Record

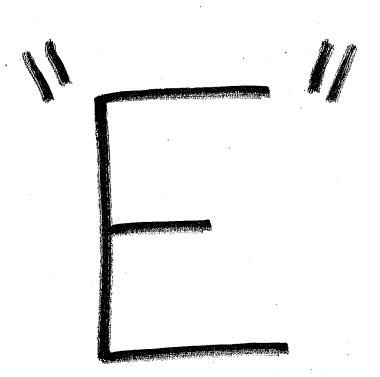
Case 5:16-cv-00698-JGB-KES Document 1 Filed 04/13/16 Page 27 of 43 Page ## ### SAN BERNARDINO COUNTY SHERIFF'S DEPARTMENT

AN BERNARDINO COUNTY SHERIFF'S DEPARTMI DETENTION AND CORRECTIONS BUREAU

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INMATE GRIEVANCE INVESTIGATION

| _ | |
|---|---|
| | Date 2-2-14 Grievance # 1434G01109 |
| | Inmate's Name Green, Trajan, Paul Booking # 1305301385 |
| | Investigation Conducted By Ron Baldwin, Food Service Supervisor Employee # D4281 |
| | SUMMARY OF COMPLAINT AND FINDINGS |
| | Complaints: Inmate states that He did not receive his PM snack. Inmate states that his trays have been "very wrong in content and time delivered. |
| | Findings: Inmates current diet is a combination-Bland-no peas/nuts/canned fruit- green salad lunch & dinner 2 snacks) His snacks are sent from the kitchen @ 0900 and 2100 hrs. Unit delivery is controlled by the unit staff. Inmate is directed to notify the unit staff if the tray and the acompaning diet slip do not match. Unit staff will contact the kitchen to correct the issue This Grievance is unsubstantiated. |
| | |
| | |
| | ACTION TAKEN |
| | Reviewed the diet. Cosulted the dietician Interviewed the inmate with the dietician. Reviewed kitchen contact procedures with the unit staff Reviewed the diet with the diet cooks |
| | Reviewed By Reviewed By The Common Pacifity Administrator Approved By Facility Administrator |
| | Written reply given to inmate on 2/5/14 At 1049 By TAPIA Date Time Print Name |
| | This complaint has been discussed with me and I have been advised of the findings. |
| - | Inmate Signature Date |
| | ☐ Original: Inmate's Booking Jacket ☐ Copy: Inmate WMMTF ()☐ Goby: Administration |



Case 5:16-cv-00698-JGB-KES Document 1 Filed 04/13/16 Page 29 of 43 Page ID #:29



SAN BERNARDINO COUNTY SHERIFF'S DEPARTMENT **Detention and Corrections Bureau**

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INITIAL INMATE GRIEVANCE GRIEVANCE APPEAL

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| | Type I | |

| Inmate's Name RADAN | aul GREEN | Booking # 13 | 05301385 |
|------------------------------|-------------------------------|-------------------------------|---------------------------------------|
| Housing Location 3 | · | Date of Complaint | 1 26,2014 |
| Date of Incident Jun. 26, 22 | Time of Incident | | • |
| | | s, times and names of persons | |
| "DIET, AGAIN OID | INOT RECEIVE | BREAKFAST! | |
| | | | · |
| On Breakfast Ticke | | | |
| immediately brought | this to the after | tion of the Deputy of | induty (Jones). |
| He politely informed | me that it was | one MAB bouche | alkalotoxus shi |
| Kitchen was closed a | bluce I fact ba | end of sides ad ton. | ve it corrected. |
| As is documented I: | | | |
| the first time I have | | | |
| not being correct. I a | starshary Ino nu | in the Mein, | t, how missing a |
| med pauses me "SEV | ERE" Stamound | iscompart! PLLAS | Lamback |
| Grievage Lakel James | 19 2014 SPEC | IAL DIET, NO PM | SNACK GIVEN!" |
| | | | |
| | | | |
| | | | |
| | (ATTACH ADDITIONAL F | | · · · · · · · · · · · · · · · · · · · |
| Inmate Signature | July 1 | Date | January 26, 2014 |
| DO | NOT WRITE BELOW THIS | LINE - STAFF USE ONLY | |
| Received By ONE | > pe's Name (please print) | Date 1/26/14 | Time <u>22:37</u> |
| Grievance# | Date | Assigned to | |
| | • | | |

Original: Inmate's Booking Jacket

Copy: Inmate





SAN BERNARDINO COUNTY SHERIFF'S DEPARTMENT

| ANDINO COUNTY SHERIFF S DELARTMENT | <u></u> | ADC |
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| Detention and Corrections Bureau | | CDC |
| | | GHRC |
| INITIAL INMATE GRIEVANCE | | WVDC |
| | · — ` | Type Lla |

| Inmate's Name TR | AJAN PAUL | GREEN | | Booking# _ | 130530 | 1385 |
|--|---------------------------------|------------------|---------------|------------------|-----------------|----------------|
| Housing Location (| | | Date of Co | emplaint Ma | rch 9,21 | 014 |
| Date of Incident 3 | 8-14 Time | e of Incident | Juner | | | Entire Dorm |
| EXPL | AIN YOUR COMPLA | INT (include dat | es, times and | d names of perso | ons involved) | |
| On March 8,20 | 114 at Dinne | r Chow to | NO(2) I | nmates(C | avcasian | s) got into |
| a very light-we | ight physical | altercati | on which | ch Dep. In | illiams & | Dep. |
| Moultrie res | sonded to. | Upon the | Deputie | es respon | se after | addressing |
| the altercation | | | | , . | | |
| our Dinner tray | s that were l | intouched | at that | point on t | the tables | or Depr |
| Williams then of assuring us we | racrea the In | imate Deni | e NEVE | D was I | Lyerbal C | promising |
| was personally i | made to a Sot | Which wi | the said ! | he would l | nak into o | retting 115 |
| fed which again | nade 10 a Ogi | nened! T | Derson | ally & obje | ically suff | ex from |
| Gastrointestina | Disorder I | take mahtl | v meds | for severe | sleep dep | rivation as a |
| direct result of my | FALSE incarci | eration oros | secution | as well as | High Blood | Pressure. |
| I am not to take | my meds on ar | empty sto | mach, as | ordered by | the Pysic | h Dr. 7-12-14. |
| The evening of Ma | ur. Bavery Ri | IDE Nurse | Nakasio | after the | ubove deta | uled expla- |
| The evening of Ma nation, still force | ed me to take | the meds a | n an em | pty stomack | discomfor | t é pain! |
| Inmate Signature | ty the | TACHADDITIONAL | TAGEON NEE | | ate March | |
| | DO NOT WRIT | TE BELOW THIS | S LINE – STA | | | |
| | CWAN | | | | | |
| Received By | 5. CHAU Employee's Name (ple | ase print) | Date | 0311 14 | Time _ <i>_</i> | 328 |
| Grievance# | Date | | Assiç | gned to | | |
| | · | 0 | | | | |

Original: Inmate's Booking Jacket

Copy: Inmate

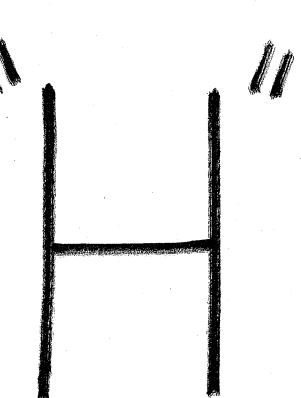
SAN BERNARDINO COUNTY SHERIFF'S DEPARTMENT **DETENTION AND CORRECTIONS BUREAU**

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| | CDC |
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INMATE GRIEVANCE INVESTIGATION

| | Date 03-14-14 | Grievance# 1434G03071 |
|---|---|--|
| · | Inmate's Name Trajan Green | Booking # |
| | Investigation Conducted By | Employee # S3231 |
| | SUMMARY OF COM | PLAINT AND FINDINGS |
| , | fed. Green alleges they did not receive dinner that n he did not receive dinner and the doctor instructed the Medication Nurse forced him to take his medicat | 'Dorm was back in order" they were all denied dinner as present and stated he would look into getting them ght. Additionally, he advised the Medication Nurse that him to take his medication after his meal. Green alleges ion. |
| | FINDINGS: This matter is being investigated by facil misconduct are confidential under current laws. | ty supervisors. All investigations involving staff |
| | | |
| | | |
| | ACTIO | N TAKEN |
| | An investigation is being conducted. Inmate Green's appropriately. | allegations, if substantiated, will be handled |
| | | |
| | | |
| | Reviewed By 2 makegand Duty Lieutenant | Approved By Facility Administrator |
| | Written reply given to inmate on 3-214 Date | At OS3/ By SKIKISON Print Name |
| | This complaint has been discussed with me and I have be | een advised of the findings. |
| - | Inmate Signature | Date |
| | ☑ Original: Inmate's Booking Jacket ☐ Cop | y: Inmate CO COPY Administration |

ASU#050402 Revised: 06.30.2005 MWATE COP COPY LAGMinistration



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SAN BERNARDINO COUNTY SHERIFF'S DEPARTMENT Det

| INO COUNTY SHERIFF'S DEPARTMENT | ليا | ADC |
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| ention and Corrections Bureau | | CDC |

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| X | INITIAL INMATE GRIEVANCE |
|---|--------------------------|
| | GRIEVANCE APPEAL |

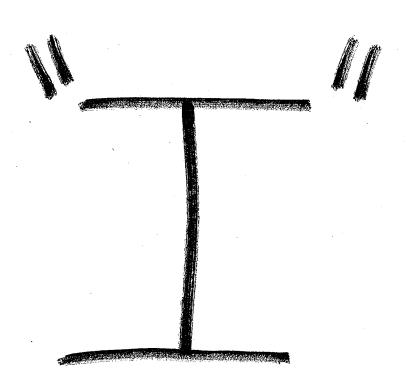
Original: Inmate's Booking Jacket

Copy: Inmate

Date _____ Assigned to ____

Copy: Administration

Grievance#



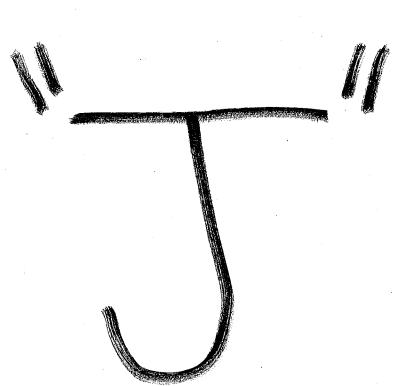


SAN BERNARDINO COUNTY SHERIFF'S DEPARTMENT DETENTION AND CORRECTIONS BUREAU

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| \boxtimes | WVDC |
| П | Type I Jail |

INMATE GRIEVANCE INVESTIGATION

| _ | |
|-----------|--|
| | Date 03-30-14 Grievance # 1434G0141 |
| | Inmate's Name Trajan Green Booking # 1305301385 |
| | Investigation Conducted By D. Stuart Employee # S3231 |
| | SUMMARY OF COMPLAINT AND FINDINGS |
| | COMPLAINT- Green alleges on 03-24-14, during dinner he asked Deputy Moultrie permission to retrieve his spoon from his bunk draw and was denied. Green alleges Moultrie told him to eat with his fingers like the other inmates housed in unit 8. Additionally, Moultrie stated "He didn't give a fuck if I was able to eat or not because he was getting off work soon and he was going to eat." Green alleges he informed Moultrie he had health and stomach complications which required him to take medication nightly. Green alleges he had to refuse his medication that evening, which caused him severe stomach pain. Green further alleges Moultrie refused to provide him with a grievance form. FINDINGS: Moultrie said on 03-24-14, he was informed inmates housed in unit 8, segment E were threatening to "Smash" another inmate, housed in segment E. The inmates in segment E were immediately placed on bunk status and assigned seating was implemented during dinner. Green and his cell mate were upset about the assigned seats and refused to eat. After the other inmates had finished eating dinner, they returned to their bunks. At that time Green also returned to his bunk and retrieved his spoon. Moultrie advised he observed Green consume his dinner. Additional Moultrie denied using profanities when interacting with Green and also denied refusing to provide Green with a grievance form. |
| vyte V | ACTION TAKEN |
| | On 03-30-14, I contacted Deputy Moultrie. |
| | Administrative Disposition: Green's allegations are unfounded. Staff's actions were in accordance with Department Policy. Moultrie advised Green was NOT denied his spoon or meal. Moultrie denied using profanities. |
| | Reviewed By Would Mall Approved By Facility Administrator |
| | Written reply given to inmate on At By |
| | This complaint has been discussed with me and I have been advised of the findings. |
| - | Inmate Signature Date |
| _ | ☐ Copy: Inmate ☐ Copy: Administration |





SAN BERNARDINO COUNTY SHERIFF'S DEPARTMENT DETENTION AND CORRECTIONS BUREAU

| | ADC |
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| | CDC |
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INMATE GRIEVANCE INVESTIGATION

| | | | | | | | | 7. | | |
|-------------------------|------------------------------|--|---|----------------------------------|---------------------------|---------------------------------|---------------------------|--|--------------------------------|--|
| Date _ 5/10/2014 | | | | | | Grievance# <u>1434G03141(1)</u> | | | | |
| Inma | ite's Name | Green, Tr | ajan | | | · | Booking | # 1305301 | 385 | |
| Inves | stigation Con | ducted By | Sergeant K. | Owens. | | | Ε | mployee# _ | O0506 | |
| | | | SUMMA | RY OF COM | PLAINT A | ND FIND | INGS | | New York | |
| COM | PLAINT: | | • | | • | | | | | |
| Gree utens | n submitted sils. Green a | a grievano Iso alleged | e on March 2 Deputy Mou | 4, 2014, alleg Itrie told him | ging Depu he did no | ity Moult ot give a | rie did no fuck if he | t allow him was not ab | to obtain eating le to eat. | |
| FIND | INGS: | | | | • . | | | | • | |
| hand | led as a per | sonnel inve | essional beh stigation. As against staff. | such, Greer | ech by sta ı is not pr | aff is take ivy to the | en serious e results d | sly and as a of any type o | result will be of | |
| | | | • | | • | • | | | | |
| | | a de la compansión de l | | ACTIO | NTAKEN | | | | | |
| On 5/ | 10/14, l inter | viewed Gr | en in Unit 8. | | and a special property | | | The Color of the C | | |
| | | | | | | - | | | | |
| | | | ÷ | | | • | | | | |
| Revie | wed By | M. | Duty Lieutenar | . · | Appr | oved By | Ta | Facility Admi | nistrator | |
| Writte | n reply given | to inmate o | | ate | At T | ime | Ву | Print | Name | |
| This co | omplaint has | been discu | ssed with me | and I have be | een advise | d of the fi | ndings. | | | |
| | | Inmate Si | gnature | | | | | Date | | |
| | | | | | | | | | | |

☑ Original: Inmate's Booking Jacket

☐ Copy: Inmate

Copy: Administration
CUPY PLEASE DELIVER

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